

**UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

EQUAL EMPLOYMENT OPPORTUNITY )  
COMMISSION, )  
 )  
Plaintiff ) Case No. 14-cv-6553  
 )  
v. ) Honorable Judge Ruben Castillo  
 )  
COSTCO WHOLESALE CORP., ) Magistrate Judge Jeffrey T. Gilbert  
 )  
Defendant.

**APPENDIX OF EXHIBITS**

**Exhibit 7  
New Hire Orientation checklist (Dep. Ex. 8)**



## NEW HIRE ORIENTATION CHECKLIST

Employee Name: Dawn Suppo

Initials      As each item is reviewed, employee should place their initials on the lines in the left column.

- DS 1. I have met my location manager. I have seen the "Meet Your Leaders," Member Service/Merchandise, and Diversity videos. I understand the Code of Ethics outlined in the Costco Wholesale Mission Statement.
- DS 2. I have received a copy of the EMPLOYEE AGREEMENT or UNION MAJORS & MINORS, and understand it is my responsibility to read and follow its policies.
- DS 3. I have received an overview of Costco's Safety program, including safety policy and responsibilities, as described in the *Costco Today Orientation* magazine and Employee Agreement.
- DS 4. I have reviewed Costco Wholesale policies contained in the Employee Agreement/Union Majors & Minors, or other materials, including safety rules and regulations.
- DS 5. I have been on a tour of my work facility (warehouse, depot, office). I have been shown the "safe path" through Receiving, location of fire extinguishers, emergency exits, first aid kits, and eye wash stations.
- DS 6. I understand that Costco prohibits all forms of employment discrimination and sexual harassment.
- DS 7. I understand that Costco has an OPEN DOOR POLICY and that I am able to use this policy to express my work-related concerns/issues. I also understand the names and contact phone numbers are listed on the OPEN DOOR POLICY poster, located in the break room of my facility.
- DS 8. I understand there is a probationary period of 90 days during which I may be terminated at any time, for any reason. I understand my job performance will be reviewed during the probationary period.
- DS 9. I understand that I am not eligible for holiday pay during my probationary period.
- DS 10. My Hourly rate of pay is: \$11.00. If salaried, my Annual rate of pay is: \$\_\_\_\_\_. If a salaried, non-exempt manager (AK, CA, CO, NJ, WI warehouses only), my Base Salary is: \$\_\_\_\_\_, and my Annual Expected rate of pay is \$\_\_\_\_\_.
- DS 11. I understand my classification is  full time  part time
- DS 12. If hourly, I have received instructions regarding the Automated Time Card System or received a time card and instructions regarding its completion.
- DS 13. I understand that Costco Wholesale policy prohibits any employee under the influence of unauthorized substances from working, and that testing may be required for an employee reasonably suspected of being under the influence or who is involved in or has contributed to an accident on the job.
- DS 14. I understand my "buddy" will be LIZ
- DS 15. I understand that if I am eligible, unless I elect otherwise, I will be automatically enrolled in Costco's short-term disability plan (except if I reside in CA, HI, NJ, NY or PR), medical plan, and 401(k) plan as described in the SPD and enrollment materials for these plans. I authorize Costco to reduce my paycheck to pay for my benefits under these plans if I am automatically enrolled.
- DS 16. I understand that I am eligible to authorize Direct Deposit for my bi-weekly paycheck. If I do not elect to participate, my payroll check may be cashed at Bank of America (in states where available) at no cost to me.
- DS 17. I have been given instructions for reporting a workers' compensation claim. I understand that I must immediately notify my manager or supervisor if I have a work-related injury or occupational disease.

Employee Signature

Date

11-13-09

FORM #PR16US 5/07

Original - Employee's File      Copy - Employee

EXHIBIT

8

Suppo 6/25/19

COSTCO-SUPPO-01208